

Draft Proceedings from Summit to Establish Priorities for Health Improvement in Frederick County October 5, 2011

Priorities in rank order from the highest to lowest number of votes received during the Summit:

1. Mental Health
2. Dental Care
3. Wellness/Prevention
4. Health Inequities
5. Access to Care
6. Early Childhood Growth and Development

MENTAL HEALTH

1. There will be 24-hour walk-in mental health services.
2. There will be “Behavioral Health Home” services available (i.e. behavioral health providers will develop resource capacity and evidence-based practice expertise to help individuals with behavioral health conditions to improve their physical health.
3. There will be a sufficient number of psychiatrists to meet the needs.
4. Stigma will not be a barrier to accessing mental health care.
5. People will choose alternatives to suicide.

Next meeting Friday, October 28th—during Mental Health Provider Council

Priority # 1 – Mental Health

Priority : Mental Health			
Goal 1: There will be (24-hour) walk-in Mental Health services.			
Members: Jim Williams jwilliams@fmh.org 240-566-3214 Pat Hanberry phanberry@fcmha.org 240-215-0415			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Mental Health			
Objective 1: Increase number of mental health providers who can prescribe medications.	1.1: Investigate hospital space—urgent care facilities, FMH space	Jim Williams	
	1.2: Mental Health Association Community Action primary care facility	Pat Hanberry	
Objective 2: Identify appropriate accessible setting(s) to provide services (security, lighting)	2.1: Religious Coalition Investigate funding sources		
	2.2: Fee for service/MA/Private Insurance Grants Public (State)		
Objective3: Procure funding for staffing and other expense.	3.1: Design staffing patterns (Use existing services?) Nurse practitioners—availability (?)		

Priority: Mental Health Care			
Goal 2: There will be “Behavioral Health Home” services available.			
Members: Scott Rose srose@waystationinc.org Heather Kirby hkirby@fmh.org 240-566-3679 (office)			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: At least one behavioral health provider as a pilot will meet the standards at a “Patient-Centered Medical Home” (e.g. hiring nurse care manager) by 10/30/12.	1.1: At least one behavioral health provider will meet standards of a “Patient-Centered Medical Home”.	Way Station will be pilot, with technical assistance from FMH and FCHD.	October 30, 2012
Objective 2: Those behavioral health providers will also implement an integrate the SAMSHA-endorsed evidence-based practice at “Integrated Illness Management and Recovery” by 10/30/2012.	2.1. That provider will implement and integrate the evidence-based profile of “Integrated Illness Management & Recovery”	Way Station will be pilot with technical assistance from FMH and FCHD	October 31, 2012
Objective 3: Evaluate clinical effectiveness and cost efficiency of services	3.1: Evaluate clinical and cost effectiveness of interventions.	Way Station, FMH and FCHD	December 31, 2012
	3.2 Seek funding to accomplish three objectives above	Way Station	February 1, 2012

Priority: Make sufficient psychiatric resources available to residents.			
Goal 3: Increase number of psychiatrists by 5-6			
Members: Marty Brown mbrown@frederickcountymd.gov 301-600-3203 Darlene Armacost darmacost@frederickcountymd.gov 301-600-3363			
Objective(s)	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: By 12/31/2012 have a pool of interested psychiatrists to interview.	1.1: Apply for funding to hire psychiatrists	Grant Writing Committee	July 1, 2012
Objective 2: Complete interview process by 3/31/2013	2.1: Begin recruitment process	Health Personnel Department	October 1, 2012
Objective 3: Have available 5-6 new psychiatrists by 12/31/2013	3.1: Establish Interview Committee 3.2: Hire/orient new psychiatrists	Interview Committee BHS Personnel	March 31, 2013 December 31, 2013

Priority: Mental Health Care			
Goal 4: Stigma will not be a barrier to accessing mental health care.			
Members: Alan Feinberg Feinberg.alan2@gmail.com			
Objectives	Key Actions	<u>Recommended</u> Person(s) Responsible	Completed By When ?
Objective 1: Individuals with mental illness to do public witnessing.	1.1: Individuals with mental/emotional/trauma challenges witness to community	A consortium headed by On Our Own	Already started but put in full gear 2012
Objective 2: Individuals with mental illness to serve on treatment teams as peer specialists.	1.2: Peers become certified for peer support	On Our Own of Frederick and Maryland	Spring 2012
Objective 3: Seek funding to accomplish three objectives above	1.3: Peer support become part of community team to reach out	On Our Own, Way Station, MHA, FCAA, etc.'	By 2013

Priority: Residents are not accessing services or choosing alternatives to suicide..			
Goal 5: People will choose alternatives to suicide.			
Members: Andrea Walker awalker@frederickcountymd.gov 301-600-1755 Derek Belz dbelz@frederickcountymd.gov 301-600-1454			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Mental Health			
Objective 1: By December 31, 2013 education will be provided and available . 75% primary care and emergency settings and behavioral health settings.	1.1: Education will be provided to and available to 75% of primary care emergency and BH setting.	Members of the Frederick County Mental Health Provider Council and FCHD	December 31, 2013
Objective 2: By October 2013 compile list of resources, create website as portal detailing alternatives to suicide. Develop Marketing materials and translated into other languages.	2.1: Compile list of resources; create website as a portal of information, detailing alternatives to suicide. Develop marketing materials and translate into several languages.	Members of the Frederick County Mental Health Provider Council and FCHD	October, 2013
Objective 3: By June 2014, 50% educating providers on stress indicators, depression indicators, screening tests primary care physicians.	3.1: 50% of primary care physicians will be educated about depression and stress indicators, use of screening tools	FC-MHPC to compile and approve (valid and proven reliability) screening tools to recommend to Primary Care Providers.	

Priority # 2: Affordable Dental Care

Priority: Affordable dental care is not available for all Frederick County residents. Mission/Vision: All Frederick County residents have access to affordable dental care.			
Members: Monica Grant mgrant@frederickcountymd.gov 301-600-3367 Brian Scott bscott@thereligiouscoalition.org 301-514-2841 Kitty Devilbiss Carolyn True Tina VonGunten Leigh Joos Harry Grandinett Diane Grove			
Goal 1: Maintain (or expand as needed) access to affordable dental care for children ages 1-20 in Frederick County.			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Dental			
Objective 1: By December 31, 2011 establish an accurate baseline for the extent of need for dental care by uninsured and underinsured children ages 1-20 in Frederick County.	1. Compile all information about uninsured and under-insured children in Frederick County including current utilization rate.	Monica Grant, FCHD	December 31, 2011

Priority: Affordable dental care is not available for all Frederick County residents. Mission/Vision: All Frederick County residents have access to affordable dental care.

Goal 2: Maintain (or expand as needed) access to affordable emergency dental care for all uninsured and underinsured adults in Frederick County.

Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Dental			
Objective 1: By June 30, 2012 establish an accurate baseline of need for emergency dental pain in adults seeking care for dental pain.	1. 1 Collecting data on adults seeking emergency dental care.	Hospital – Harry Grandinett Religious Coalition – Rev. Scott Mission of Mercy – David Liddle	June 30, 2012
	1.2 Collect and compile data	Tina VonGuten, FCHD Hood College	July 30, 2012
	1.3. Analyze data	Intern from Hood College Carolyn True, Dept. of Aging	October 1, 2012

Priority: Affordable dental care is not available for all Frederick County residents. Mission/Vision: All Frederick County residents have access to affordable dental care.

Goal 3: Increase access to affordable preventative dental care for all uninsured and underinsured adults in Frederick County.

Objective 1: By February 28, 2012, identify three best practice models from comparable jurisdictions.	1. 1. Meeting of members of focus group	Health Department	
Objective 2: By June 30, 2012, establish an accurate baseline of unmet need for preventative dental care for adults 21-65 and adults 65 and older.	2.1. Survey of dentists		
Objective 3: By February 28, 2012, recruit a member of the Frederick County Dental Society to serve as an active member of this group.			
Objective 4: By June 30, 2012 increase by 10 the number of dentists who accept patients pro bono or at a reduced fee.			

<p>Objective 5: By December 31, 2012 utilize the dental suite at the Montevue/Citizens complex at 50% of total planned capacity.</p> <p>Dental Committee Next Meeting Date—Tuesday, October 25, 2011 at 9:00 a.m. Administration Finance Room at FCHD.</p>			
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Priority #3: Create Awareness Around Health Inequities

Priority: Create awareness around Health Inequities			
Goal 1: Compile current research and data as it is relevant to Frederick County and the other LHIP health priorities by 12/2012.			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: Search data resources and review and summarize all relevant data/research.	1: Establish contacts with FCHS for technical support/information/viability	Danielle	December 2012
	2: View the online FCHD web page, efforts and structure.	All	
	3. Have reports tailored content to web page production and structure/draft	All	
Objective 2: Parse pertinent information into categories—LOH pertinent priorities and public knowledge to disseminate.	1. Get FCHD presentation for content approval and expect content review	All	
Objective 3: Report body of information in a report to be approved by FCHD prior to dissemination.	1: Get FCHD to publish.	FCHD	
	2. Announce publication	FCHD	

Priority: Create awareness around Health Inequities			
Goal 2: Campaign to disseminate knowledge internally (LHIP was) and externally to the community by 12/2013.			
Members: Ralph Kline R.Kline58@gmail.com Danielle Wivell-Wagner dwivellwagner@yahoo.com Veronica Nimpson vnimpson@aol.com Kimberly Fox Kimberly.L.Fox@Kp.org 301-832-8425			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: Utilize and coordinate with community events to educate on issues or sponsor an event. Participate in a minimum of one event.	1.1: Develop a communications plan/budget resources	Veronica	December 2013
Objective 2: Paper/informational campaign in one of the forms paper, media, group setting	2.1: Make community contacts/key stakeholders	Kimberly/Veronica	December 2013
	2.2: Set-up events schedule	Veronica	December 2013
Objective 3: Provide a centralized resource available to the community on health inequities on a web-based platform.	3.1: PR for event(s)	Kimberly/Danielle/Veronica	December 2013

Priority: Create awareness around Health Inequities			
Goal 3: Create centralized resource/location to increase awareness on health inequities. Established as WIP by 12/2012.			
Objectives	Key Actions	<u>Recommended Person(s)</u> Responsible	Completed by When?
Objective 1: Explore FCHD capacity to add links and content.	1. Obtain body of knowledge surrounding HI with secondary sources and research. Assign reading.	Kimberly	December 2012
	2. Frederick County census health, transportation and other factors (map) zip code synthesis.	Danielle	
	3. Review of all documents and summarize	All	
Objective 2: Utilize other health department online efforts as research to determining format and content.	1. Categorize research/data	All	
	2. Report of the body of info draft structure.		
Objective 3: Draft content, obtain FCHD approvals and pertinent inputs prior to publishing.	1. Report review/draft	All	
	2. Final report	Ralph	

WELLNESS AND PREVENTION TABLE

NAME	TELEPHONE [edited]	E-MAIL [edited]
Tom Werner		
Adriana Roa		
Angie Blair	301-600-1861	
Carlota Salter		
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Todd Crum		
Jackie Douge		
Laurie Frey		
Barry Churchill		
Angela Phillips		
Donna Devilbiss		
Chris Lane		

Priority # 4: Wellness/Prevention

Priority: Wellness/Prevention			
Goal 1 : Increase the proportion of Frederick to residents who are physically active.			
Look at these in the context of: 1) Health Disparities; 2() Cultural Competencies			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: Increase family oriented (local schools) evening physical activities for adults with their children.	1. Investigate local childhood obesity data	Frederick County Health Department	December 2011
	2. Investigate chronic childhood disease data.	Frederick County Health Department	December 2011
	3. ER offer ees opportunity to increase work day physical activity.	Frederick County Health Department	
Objective 2: Increase access to physical activity for seniors – via senior centers and other opportunities.	1. Increase bike trail (in city)		
	2. ER offer ees health care coverage that promotes healthier lifestyles.		
	3. Investigate MD health insurance providers healthier lifestyle coverages.	Subcommittee Members	December 2011
Objective 3: Increase children physical activity by adding more activity to their school day.	1. (Parks & Recreation) Family oriented evening physical activities in local school settings.		
	2. Create walking/hiking clubs		
	3. Increase Senior Citizen Access.		

Priority: Wellness/Prevention			
Goal 2 : Increase the proportion of Frederick County residents who are at a healthy weight.			
Look at these in the context of: 1) Health Disparities; 2) Cultural Competencies			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: By 2014, 39% of Frederick County residents who are at a healthy weight.			
Objective 2: Kids			
Objective 3: Access to healthy food			

Priority: Wellness/Prevention			
Goal 3: Reduce the overall use of tobacco products in Frederick County			
Look at these in the context of: 1) Health Disparities; 2) Cultural Competencies			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: Reduce tobacco use by adults by 3% by 2014.	TBD—will be talking to Tobacco Coalition		
Objective 2: Reduce tobacco use by youth (18 & under) by 3% by 2014. Buka/electronic cigarettes			
Objective 3: Reduce tobacco use by pregnant women by 7% by 2014.			

ACCESS TO CARE/ WORK GROUP

NAME/ADDRESS

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E-MAIL [edited]

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Miriam Dobson
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Elizabeth Chung
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Priority # 5: Access to Care

Priority: Access to Care			
Goal 1: Improve access to care for those with language barrier.			
Objectives	Key Actions	Recommended Person(s) Responsible	Completed by When?
Objective 1: Increase interpreter services with health care and health promotion activities.	1. Identify which providers have need for interpretive services	Elizabeth Chung (L&D) Chris Lane, FCHD	December 1, 2011
	2. I.D. available interpreter services	Miriam Dobson, FCHD	December 1, 2011
	3. Meet with Language Barrier Subcommittee of Access to Care.	Elizabeth Chung (L&D) Chris Lane, FCHD Miriam Dobson, FCHD	December 8, 2011 Conference Call
	4. Formulate a plan (putting services to providers with most need)	Elizabeth Chung (L&D) Chris Lane, FCHD Miriam Dobson, FCHD	
Objective 2: Improve/increase language specific informational resources (diverse languages)	1. Identify existing and funding sources for written language resources.	Chris Lane, FCHD Miriam Dobson, FCHD	January 2012
Objective 3: Improved language interpretation/translation training	1. Get with workforce development and other partners to develop trainings.	Elizabeth Chung, L&D	January 2012

Priority: Access to Care			
Goal 2: Development of Health Resource Coordination			
Objectives	Key Actions	<u>Recommended</u> Person(s) Responsible	Completed by When?
Objective 1: Coordinate the service providing organizations (actual workers) involved in Coalition meetings	1. Health Care Coalition	David Liddle Nancy Haines Hal Ehart	October 24, 2011
Objective 2: To HD for interagency funding for this liaison position.			
Objective 3: Public awareness.			

Priority: Health Care Access			
Goal 3: Evaluate M.A. reimbursement to demonstrate barriers to care			
Objectives	Key Actions	<u>Recommended Person(s)</u> Responsible	Completed by When?
Objective 1: Survey specialty and PCPS for reason in not accepting M.A.	1. Identify whether a similar survey has been done in the last five years.	Blair Hughes Jennifer Tester	
Objective 2: Identify specialty areas that are most urgent for the population.	1. Identify the top 5 specialty areas that lack M.A. providers and have the most impact on the population.		
	2. Survey 25 PCPs and 25 specialists to determine primary reasons for not participating with M.A.		

Priority: Health Care Access			
Goal 4: Increase number of residents covered by health insurance.			
Objectives	Key Actions	<u>Recommended Person(s)</u> Responsible	Completed by When?
Objective 1: By 2014, increase awareness within community via agencies that doctor's offices are being contacted for care.	1. Develop pamphlet/flier information of health care resources.		

Objective 2: Compile what the resources for health insurance access in addition to MA/CHIP, PAC, etc.	1. Distribute to providers/agencies/community.		
Priority: Improve Health Care Access to residents in rural county of Frederick			
Goal 5: 1. Increase % of residents that can see a medical doctor/provider for primary care, dental care, specialty services. 1. Increase number of health practitioners seeing under-insured and uninsured.			
Objectives	Key Actions	<u>Recommended</u> Person(s) Responsible	Completed by When?
Objective 1: Transportation --meeting with Transit Authority --meeting County Commission			
Objective 2: Increase reimbursement rates (public and private insurance) to providers.			

Priority #6: Early Childhood Growth and Development

Priority : Early childhood growth and development and related services.			
Members: Kathleen Evans kevans@jhhc.com Katherine Murray kmurry@fmh.org Maria Dennis, Lead mdennis@frederickcountymd.gov 301-600-2775 Martha Ruiz mruiz@frederickcountymd.gov			
Goal 1: Safe and appropriate home environment			
Objectives	Key Actions	Name and Organization Responsible	Completed by When?
Objective: To provide education and support to families to facilitate young child's healthy growth and development.	1. Develop concept paper for safe home environment.	Committee-Early Childhood Development and Services	January 31, 2012
	2. Create a list for distribution of material.	Committee-Early Childhood Development and Services	March 31, 2012
	3. Prioritize three messages	Committee-Early Childhood Development and Services	June 30, 2012
	4. Secure resources	Committee-Early Childhood Development and Services	September 30, 2012
	5. Assign members to distribution	Committee-Early Childhood Development and Services	September 30, 2012
	6. Produce material	Committee-Early Childhood Development and Services	December 31, 2012
	7. Distribute	Committee-Early Childhood Development and Services	January 31, 2013